

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>[Signature]</i>	64934	01/12/01
RESPONSE FORMALITY REVIEW	<i>[Signature]</i>	64934	02/12/01

INDEX OF CLAIMS

✓ Rejected N Non-elected.
 = Allowed I Interference
 (Through numeral) Canceled A Appeal
 - Restricted O Objected

Claim	Date
Final	
Original	
1	7/19/04
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Claim	Date
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Best Available Copy

If more than 150 claims or 10 actions
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